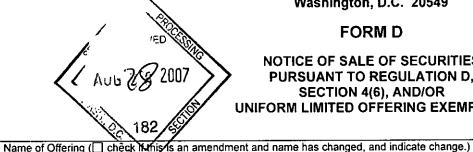
## **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



## FORM D

NOTICE OF SALE OF SECURITIES **PURSUANT TO REGULATION D,** SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average	

OMB APPROVAL

SEC USE ONLY						
Prefix	Serial					
DAT	E RECEIVED					
l ,						

Morgan Stanley Offshore	Infrastructure Part	ners A L.P.					
Filing Under (Check box(		Rule 504	☐ Rule 505		☐ Sect	ion 4(6)	
Type of Filing:	New Filing	Amendment     Amendme					
		A. BA	SIC IDENTIFICATIO	N DATA		61     1881   1911   1886   918, BURN   1819   1814	
1. Enter the information	requested about the	sissuer					
		nendment and name h	as changed, and indi	cate change.)	1161311	ODINI HORIY ODINI KODIN DINDI BIKAT INNI 1819 YANT	
Morgan Stanley Offshore				<del></del>	T. ( ).	07076589	
Address of Executive Off		P.O. Box 309G	treet, City, State, Zip∃ F, Ugland House, Sot	ath Church	Teleph	<b>V</b> .	
c/o M&C Corporate Serv			ayman, Cayman Isla				
Address of Principal Bus		(Number and Si	treet, City, State, Zip	Code)	relephone Num	ber (Including Area Code)	
(if different from Executive c/o Morgan Stanley Infra		1585 Broadway	, New York, New Yor	k 10036	212-761-8877	PROCESSED	
Brief Description of Busin		1000 Bioddinay	, 11011 1011, 11011 101	10000	<u> </u>	RUULUGLU	
Bild Beschpton of Basi	1033				B	SEP 0 6 2007 THOMSON	
		·· <del>·</del>				EINANCIAL	
Type of Business Organi	zation	<b>™</b> Posted and a				anarify):	
corporation		•	ship, already formed		other (please	specity).	
business trust		☐ limited partner	ship, to be formed				
		·	Month	Year			
Actual or Estimated Date	of Incorporation or	Organization:	1 2	0 6	Actual	☐ Estimated	
Actual of Estimated Date	or incorporation of	Organization.			Z3 / Clubi		
Jurisdiction of Incorporat	ion or Organization		J.S. Postal Service al N for other foreign ju		e: F N		
GENERAL INSTRUC	TIONS		-	-			
U.S.C. 77d(6).	_					17 CFR 230.501 et seq. or 1	
When to File: A notice mand Exchange Commiss on which it is due, on the	ion (SEC) on the ea	rlier of the date it is re	ceived by the SEC at	the address given	notice is deeme below or, if recei	d filed with the U.S. Securitie ved at that address after the	s date
Where to File: U.S. Secu	rities and Exchange	Commission, 450 Fift	th Street, N.W., Wash	nington, D.C. 20549	3. ·		
Copies Required: Five (				n must be manually	signed. Any cop	pies not manually signed mus	st be
Information Required: A	new filing must cor equested in Part C	tain all information red	juested. Amendment	s need only report ition previously sup	the name of the i	issuer and offering, any chan and B. Part E and the Append	ges lix
Filing Fee: There is no fe	ederal filing fee.						
ULOE and that have add to be, or have been mad	opted this form. Iss le. If a state require his notice shall be f	uers relying on ULOE r is the payment of a fee	must file a separate n as a precondition to	otice with the Secu the claim for the ex	irities Administrat cemption, a fee ir	ose states that have adopted or in each state where sales the proper amount shall notice constitutes a part of th	are
				<u>-</u>	· <del></del> ·		
Failure to file notice in	the appropriate s	tates will not result i	ATTENTION n a loss of the fede	ral exemption. Co	onversely, failur	e to file the appropriate fe	deral

Persons who respond to the collection of information contained in this form are not required to

respond unless the form displays a currently valid OMB control number.

SEC 1972 (05-05)

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer □ Director □ General and/or □ General and Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Morgan Stanley Infrastructure GP LP Business or Residence Address (Number and Street, City, State, Zip Code) c/o Morgan Stanley Infrastructure Inc., 1585 Broadway, New York, New York 10036 ⊠ General and/or ■ Beneficial Owner Executive Officer Director Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Morgan Stanley Offshore Infrastructure GP Ltd. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Morgan Stanley Infrastructure Inc., 1585 Broadway, New York, New York 10036 ☐ Executive Officer ☐ General and/or □ Director ☐ Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Morgan Stanley & Co. Incorporated Business or Residence Address (Number and Street, City, State, Zip Code) 1585 Broadway, New York, New York 10036 General and/or □ Promoter ☐ Beneficial Owner □ Executive Officer □ Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Bank Morgan Stanley AG Business or Residence Address (Number and Street, City, State, Zip Code) Bahnhofstrasse 92, Zurich CH-8023 Switzerland ☐ Executive Officer □ Director General and/or Check Box(es) that Apply: □ Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Morgan Stanley & Co. International plc Business or Residence Address (Number and Street, City, State, Zip Code) 25 Cabot Square, Canary Wharf, London, United Kingdom, E144QA ☐ Beneficial Owner ☐ Executive Officer Director General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Morgan Stanley Distribution, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) One Tower Bridge, 100 Front Street, West Conshohocken, Pennsylvania, 19428 ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Director Managing Partner Full Name (Last name first, if individual) Morgan Stanley Investment Management Limited Business or Residence Address (Number and Street, City, State, Zip Code) 20 Bank Street, Canary Wharf, London, E14 4AD United Kingdom ☐ General and/or □ Executive Officer Director Check Box(es) that Apply: ☑ Promoter ■ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Morgan Stanley Asia Limited Business or Residence Address (Number and Street, City, State, Zip Code) 11th Floor, Tower Three Exchange Square, Central, Hong Kong

	<u> </u>	A. BASIC IDENTIFI	CATION DATA	•	
Check Box(es) that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)		<u></u>		
Morgan Stanley Asia (Singar		·····			
Business or Residence Addr	,	•			
23 Church Street, #16-01 Ca					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if Wahba, Sadek	findividual)				
Business or Residence Addr	•				
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadwa	ay, New York, New York 100			*-
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, it Hahn, Jeffrey D.	findividual)	•			
Business or Residence Addr	ess (Number and Street	, City, State, Zip Code)			
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadwa	ay, New York, New York 10	036		· 
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addr	ess (Number and Street	, City, State, Zip Code)			
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadwa	ay, New York, New York 10	036		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, in Pollock, Frederick	f individual)				
Business or Residence Addr	ess (Number and Street	. Citv. State, Zip Code)	····		•
c/o Morgan Stanley Infrastru			036		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Rein, Walter E.	·				
Business or Residence Addr	ess (Number and Street	t, City, State, Zip Code)			
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadwa	ay, New York, New York 10	036		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	⊠ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)		-		
Tannenbaum, Elliot					<u>-</u>
Business or Residence Addr	•				
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadw	ay, New York, New York 10			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Cattier, Jennifer M.					<u> </u>
Business or Residence Addr	•		026		
c/o Morgan Stanley Infrastru		·-			[] Consert == 4/==
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Vogelsang, Peter R.	rese /Number and Charles	City State 7in Code			
Business or Residence Addi c/o Morgan Stanley Infrastru	•		036		
Go Morgan Stanley Innastru	otale mo., 1000 bloadw	aj, men rom, new rom to			<del></del>

		A. BASIC IDENTIF	ICATION DATA	*	-
Charle Baylog) that Analisi	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or
Check Box(es) that Apply:	☐ Promoter	☐ petielicial Owner	☑ Executive Officer	C) Director	Managing Partner
Full Name (Last name first, if	individual)			<u></u>	<u></u>
Cohen, Martin M.	·				
Business or Residence Addre	ess (Number and Stree	t, City, State, Zip Code)		-	
c/o Morgan Stanley Infrastruc	cture Inc., 1585 Broadw	ay, New York, New York 10	036		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)		<u> </u>		
Herzer, Charlene R.					<u></u>
Business or Residence Address	· · · · · ·		·		
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadv	vay, New York, New York 10	036		······································
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)			·	
Krause, Susan M.					
Business or Residence Addr					
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadv	vay, New York, New York 10			<u> </u>
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, it	f individual)	<del></del>	<del></del>		
Brody, Jacqueline T.				•	<u> </u>
Business or Residence Addr	-	-			
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadv			<u></u>	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, it	findividual)				
McNally-Reynolds, Kathleen					
Business or Residence Addr	•				
c/o Morgan Stanley Infrastru	cture Inc., 1585 Broadv	vay, New York, New York 10	036		
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, it					
Stichting Bedrijfstakpensioer	<u>·</u>		<u> </u>		
Business or Residence Addr	•	•			
10 Basisweg, Amsterdam, N	oord-Holland, NL-1043		<del></del>		
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i					
PFA Pension, Forsikringsakt		· · · <u></u>	<u></u>		•
Business or Residence Addr		et, City, State, Zip Code)			
4 Sundkrogsgade, Copenha	gen 2100, Denmark	· · · · · · · · · · · · · · · · · · ·	·		. <del>. :</del> -

					В.	. INFORMA	TION ABOU	T OFFERIN	G				
1	Upo 45 -	inaura'	Lordor- 4th	o loouer late:	nd to nell to	nan aa	itad investe	in this affa-	ing?	•		Yes	No ⊠
1.	Has the	issuer soic	i, or does the	e issuer inte			ited investors fix, Column 2		-		•••••	u	ы
2.	What is t	the minimu	ım investme	nt that will be			ividual?	-		,,,,,,,,,		\$5,000,000 <sup>1</sup>	
												Yes	No
												$oxed{oxed}$	
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)										son to be s, list the		
		ast name f Stanley A		lual)		_							
			•	umber and S 3 Switzerland	•	State, Zip Co	de) 						
Nam	e of Ass	ociated Bro	oker or Deal	er									
						olicit Purcha	sers					☐ All States	
,, [A]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI <b>]</b>	[ID]
[11]	L]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M	-	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	(ND)	[OH]	[OK]	[OR]	[PA]
(R	RI]	[SC]	[SD]	[TN]	[ХТ]	[UT]	[VT]	[VA]	[AW]	[WV]	[WI]	[WY]	[PR]
	-		irst, if individ	lual) ement Limite	ed								
				umber and S ondon, E144	· <del>=</del>	State, Zip Co Kingdom	ode)						
Nam	e of Ass	ociated Bro	oker or Deal	er									
						olicit Purcha	sers					☐ All States	<b>;</b>
[A	rF]	[AK]	(AZ)	(AR)	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]
M] F]		[NE] [SC]	[NV] [SD]	(NH) [TN]	[NJ] [XT]	(NM) [UT]	(NY) [VT]	[NC] [VA]	[ND] [WA]	[HO] [VW]	(OK)	[OR] [WY]	(PA) [PR]
	X1)	[30]	[00]	[114]	[17]	[01]	[4,1]	(***)	[*****]	[***1	()	()	(r - v)
			irst, if individ										
				umber and S ondon, E144	_	State, Zip Co Kingdom	ode)						
Nam	ne of Ass	ociated Br	oker or Deal	ler				<u> </u>					
						olicit Purcha	sers	*******************				☐ All States	3
•	(L)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	1T'}	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(F	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

<sup>1</sup> The general partner reserves the right to waive this requirement in its discretion.

·				B.	INFORMA*	TION ABOU	T OFFERIN	G			• • • • • • • • • • • • • • • • • • • •	
Full Name (		irst, if individ	ual)	<u>.</u>	3,111,111					···		<del></del>
			ımber and S	treet, City, S	State, Zip Co	de)	-				· ·	
		•		-	Pennsylvania							
Name of As	sociated Bro	oker or Deal	er									<u>.</u>
					olicit Purchas						☐ All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	[CT]	(DE)	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM] [UT]	[NY] [VT]	[NC] [VA]	(ND) [WA]	(OH) [WV]	(OK) [WI]	(OR) [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	נייטן	[V1]	[[77]		[***]		[***]	[]
Full Name (Last name first, if individual)												
	Morgan Stanley Asia Limited											
					State, Zip Co	de)						
11 <sup>th</sup> Floor, 7	Tower Three	Exchange S	Square, Cen	tral, Hong K	ong						-	
Name of As	ssociated Br	oker or Deal	er									
States in W	hich Persor	Listed Has	Solicited or	ntends to S	olicit Purcha	sers					· · · · · · · · · · · · · · · · · · ·	
(Check	"All States"	or check ind	ividual State	s)							☐ All States	3
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[1D]
(IL)	[IN]	[1A]	[KS]	[KY]	[LA]	(ME)	(MD)	(MA)	(MI)	[MN] {OK}	[MS] [OR]	(MO) [PA]
[MT] [RI]	(NE) [SC]	(NV) [SD]	[NH] [TN]	[NJ] [TX]	(MM) [UT]	[YN] [VT]	[NC] [VA]	(ND) [WA]	(HO) [VW]	[WI]	[OK] [WY]	(PR)
[170]	[00]	[00]	[711]	[,,,,]	(0.)	<b>(</b> ,					<u> </u>	
Full Name	(Last name	first, if individ	dual)				_					
		Singapore) P						_				
Business o	r Residence	Address (N	umber and S	Street, City,	State, Zip Co	ode)						
23 Church	Street, #16-	01 Capital S	quare, Singa	pore 04948	1							
Name of As	ssociated Bi	oker or Dea	ler				-					
States in 14	thich Doros	a Lietad ⊔a-	Solicited or	Intende to S	olicit Purcha	SAIS						
											☐ All States	3
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
(IL)	[IN]	(AZ) (IA)	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	(HN]	[NJ]	[MM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	{UT <b>)</b>	[VT]	[AV]	[AW]	[WV]	[WI]	(WY)	[PR]

<del></del>				В	INFORMA	TION ABOU	T OFFERIN	G				
Full Name	(Last name t	first, if individ	iual)							_		
Morgan St	anley & Co. I	ncorporated							•			
Business of	or Residence	Address (N	umber and S	treet, City, S	State, Zip Co	de)					-	
1585 Broadway, New York, New York 10036												
Name of A	ssociated Br	oker or Deal	er		•							
	Vhich Persor "All States"										☐ All State	:s
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(OII	1001	ICDI	(TAII	(TVI	fi iT1	νπ	0.781	14147	UVVV	na/n	DA/Y1	IPRI

	Aggregate		Amount
Type of Security	Offering Price		Already Sold
Debt	\$		\$
Equity	\$		\$
☐ Common ☐ Preferred			
Convertible Securities (including warrants)	\$		\$
Partnership Interests	\$581,600,000		\$581,600,000
Other (Specify).	<u>\$</u>		\$
Total	\$581,600,000		\$581,600,000
Answer also in Appendix, Column 3, if filing under ULOE.			
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
	Number Investors		Dollar Amoun of Purchases
Accredited Investors	56		\$581,600,000
Non-accredited Investors			\$
Total (for filings under Rule 504 only)			\$
Answer also in Appendix, Column 4, if filing under ULOE.			
securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	T: af		Dollar Amoun
Type of offering	Type of Security		Sold
			\$
Rule 505			<del></del>
Rule 505			\$
Regulation A			\$
Regulation ARule 504			\$ \$
Rule 504			\$ \$ \$
Regulation A			\$ \$ \$ \$31,928
Regulation A		<b>□</b>	\$ \$ \$ \$31,928 \$185,150
Regulation A		🖸 🔯	\$ \$ \$ \$31,928 \$185,150 \$
Regulation A		🖸 🔯	\$ \$ \$ \$31,928 \$185,150 \$
Regulation A		🖸 🔯 🖸	\$ \$ \$ \$31,928 \$185,150 \$
Regulation A		🖸 🔯 🖸	\$ \$ \$ \$31,928 \$185,150 \$
Regulation A	other miscellaneous	  	\$ \$ \$31,928 \$185,150 \$ \$

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Placement fees in an aggregate amount of approximately \$5,012,500 have been paid separately by certain investors and the general partner of the issuer. Such fees are not expenses of the issuer.

C.	OFFERING PRICE.	NUMBER OF INVESTORS.	. EXPENSES AND USE OF PROCEEDS

Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.

	Officers, Directors & Affiliates		Payments To Others
Salaries and fees	\$		\$
Purchase of real estate	\$		\$ .
Purchase, rental or leasing and installation of machinery and equipment	<u>\$</u>		\$
Construction or leasing of plant buildings and facilities	\$		\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$		\$
Repayment of indebtedness	\$		\$
Working capital	\$		\$
Other (specify): Investments in infrastructure assets.	\$	$\boxtimes$	\$581,114,104
	\$		\$
Column Totals	\$	$\boxtimes$	\$581,114,104
Total Payments Listed (column totals added)	反 \$581,1	14,10	4

The issuer has duly caused this notice to be signed constitutes an undertaking by the issuer to furnish furnished by the issuer to any non-accredited investigation.	to the U.S. Securities and I	Exchange Commission	his notice is filed under Rule 505, the following signature n, upon written request of its staff, the information
Issuer (Print or Type)	Signature		Date
Morgan Stanley Offshore Infrastructure Partners A L.P.	Find	PMM	August <i>2-7</i> , 2007
Name of Signer (Print or Type)	Title of Signer (Print or	Туре)	
Frederick Pollock	Vice President of Morga GP LP, managing gene		re Inc., general partner of Morgan Stanley infrastructure r

D. FEDERAL SIGNATURE

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

